PTO/SB/01 (05-03)

Approved for use through 04/30/2003. OMB 0651-0032 U.S. Patent and Trademark Office; U.S. DEPARTMENT OF COMMERCE

1633(Arl)

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DECLARATION FOR UTILITY OR

Attorney Docket Number

First Named Inventor

DES		Gretz, Thomas J.									
PATENT A	N [COMPLETE IF KNOWN									
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I hereby declare that:											
Each inventor's residence, mailing address, and citizenship are as stated below next to their name.											
I believe the inventor(s) named below to be the original and first inventor(s) of the subject matter which is claimed and for											
which a patent is sought on the invention entitled: CABLE SUPPORT AND METHOD											
CABLE SUFFORT AI	AD METHO:	D									
(Title of the Invention)											
the specification of which											
is attached hereto											
OR											
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was filed on (MM/DD/Y	YYY) [as Unit	ed States Ap	plication N	umber or PC	T International				
Application Number		and was amended	on (MM/E	DYYYY)			(if applicable).				
I hereby state that I have reviewed and understand the contents of the above identified specification, including the claims, as											
amended by any amendment specifically referred to above.											
I acknowledge the duty to disclose information which is material to patentability as defined in 37 CFR 1.56, including for											
continuation-in-part application and the national or PCT intern					the filing of	date of the p	orior application				
I hereby claim foreign priority					any foreic	n applicatio	n(s) for patent.				
inventor's or plant breeder's ri	ights certificate	(s), or 365(a) of any	PCT inte	rnational app	olication wh	ich designat	ed at least one				
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[Page 1 of 2]
This collection of information is required by 37 CFR 115 and 37 CFR 1.63. The information is required to obtain or retain a benefit by the public which is to file (and by the USPTO to process) an application. Confidentiality is governed by 35 U.S.C. 122 and 37 CFR 1.14. This collection is estimated to take 21 minutes to complete, including gathering, preparing, and submitting the completed application form to the USPTO. Time will vary depending upon the individual case. Any comments on the amount of time you require to complete this form and/or suggestions for reducing this burden, should be sent to the Chief Information Officer, U.S. Patent and Trademark Office, U.S. Department of Commerce, P.O. Box 1450, Alexandria, VA 22313-1450. DO NOT SEND FEES OR COMPLETED FORMS TO THIS ADDRESS. SEND TO: Commissioner for Patents, P.O. Box 1450, Alexandria, VA 22313-1450.

If you need assistance in completing the form, call 1-800-PTO-9199 and select option 2.

DECLARATION — Utility or Design Patent Application

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Additional inventors or a legal rec	oresentative are bein	o named on t	the s	upplement	tal sheet	t(s) PTO/SB/02A	or 02l R a	attached hereto

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Application Number Filing Date

First Named Inventor Gretz, Thomas J. POWER OF ATTORNEY OR Title CABLE SUPPORT AND METHOD **AUTHORIZATION OF AGENT** Art Unit **Examiner Name Attorney Docket Number** 1633(Arl) I hereby appoint: Practitioners at Customer Number 30010 Practitioner(s) named below: PATENT TRADEMARK OFFICE Name Registration Number as my/our attorney(s) or agent(s) to prosecute the application identified above, and to transact all business in the United States Patent and Trademark Office connected therewith. Please change the correspondence address for the above-identified application to: The above-mentioned Customer Number. OR Place Customer Practitioners at Customer Number. Number Bar Code Label here OR Firm or Individual Name Address Address City State Zip Country Telephone Fax l<u>am</u>the: Applicant/Inventor. Assignee of record of the entire interest. See 37 CFR 3.71. Statement under 37 CFR 3.73(b) is enclosed. (Form PTO/SB/96). SIGNATURE of Applicant or Assignee of Record Name <u>Thomas J. Gretz</u> Signature Telephone Date 570-562-0270 0 NOTE: Signatures of all the inventors or assignees of record of the entire interest or their representative(s) are required. Submit multiple

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